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	Application Number	09/925,786
TRANSMITTAL	Filing Date	08/09/2001
l / FORM	First Named Inventor	Thomas Petite
DEC 1 5 2005 B	Art Unit	2152
(to be used for all correspondence after initial filing)	Examiner Name	El-Hady, Nabil M.
	Attorney Docket Number	STAT1150
Total Number of Hages in This Submission 1 STAT1150		
ENCLOSURES (Check all that apply)		
Fee Transmittal Form	Drawing(s)	After Allowance Communication to TC
Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences
Amendment/Reply	Petition Details	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
After Final	Petition to Convert to a Provisional Application	Proprietary Information
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence	on Status Letter
Extension of Time Request	Terminal Disclaimer	Other Enclosure(s) (please Identify below):
	Request for Refund	Response to Notice of Allowance w/Request
Express Abandonment Request		for Continued Examination and Information Disclosure Statement; 59 Cited References;
Information Disclosure Statement	CD, Number of CD(s)	Postcard;
	Landscape Table on Cl	D
Certified Copy of Priority Document(s)	arks	
Reply to Missing Parts/		
Incomplete Application Reply to Missing Parts		
under 37 CFR 1.52 or 1.53		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name Troutman Sanders LLP		
Signature		
Printed name	·	
James Hunter Yancey, J.P.	1	5 N- I
Date 4 December 20	OOS	Reg. No. 53,809
CERTIFICATE OF TRANSMISSION/MAILING		
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Typed or printed name Candice P. Dysart Date 12 13 15		
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Approved for use through 07/31/2006. OMB 0651-0032 DEC 1 5 2005 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Fees pursuant to the Constitution on 12,000,000. Complete if Known **Application Number** 09/925.786 TRANSMITTAI Filing Date 08/09/2001 For FY 2005 First Named Inventor **Thomas Petite Examiner Name** El-Hady, Nabil M. Applicant claims small entity status. See 37 CFR 1,27 Art Unit 2152 **TOTAL AMOUNT OF PAYMENT** 395.00 Attorney Docket No. STAT1150 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: 20-1507 Deposit Account Name: Troutman Sanders For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** EXAMINATION FEES SEARCH FEES **Small Entity Small Entity Small Entity Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 200 150 500 250 100 Design 200 100 100 50 130 65 Plant 200 100 300 160 80 150 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Fee Paid (\$) **Multiple Dependent Claims** Fee (\$) Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets

Extra Sheets

Number of each additional 50 or fraction thereof - 100 = (round up to a whole number) / 50 = Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) RCE Fee (SMAll Entity Other (e.g., late filing surcharge):

SUBMITTED BY Registration No. 53,809 Signature Telephone 404-885-3696 (Attorney/Agent) Name (Print/Type) James Hunter Yancey,

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